

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.         | DATE                |
|---------------------------|----------|----------------|---------------------|
| FEE DETERMINATION         | ET       |                | 08/01/01            |
| O.I.P.E. CLASSIFIER       |          |                |                     |
| FORMALITY REVIEW          | S.A. m   | J.C. 844<br>92 | 08/14/01<br>3/24/02 |
| RESPONSE FORMALITY REVIEW |          |                |                     |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim    | Date     |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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 18, 28, 42